

**> PTO/SB/13 (11-96)

Approved for use through 8/30/99. OMB 0851-0033
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REQUEST FOR FILING A PATENT APPLICATION UNDER 37 CFR 1.60

DOCKET NUMBER	ANTICIPATED CLASSIFICATION OF THIS APPLICATION		PRIOR APPLICATION EXAMINER	ART UNIT
TOBINICK 3.0-009(CIP)(DIVII)	CLASS	SUBCLASS	Examiner William R.A. Jarvis	1614

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

This is a request for filing a ☐ continuation ☒ divisional application under 37 CFR 1.60, of pending prior Application Number 09 / 476,643, filed on 12/31/99 entitled TNF INHIBITORS FOR THE TREATMENT OF NEUROLOGICAL, RETINAL AND MUSCULAR DISORDERS

1. Enclosed is a copy of the latest inventor-signed prior application, including a copy of the oath or declaration showing the original signature or an indication it was signed. I hereby verify that the papers are a true copy of the latest signed prior application number 09 / 476,643 and further that all statements made herein of my own knowledge are true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
TOTAL CLAIMS (37 CFR 1.16(c))	17	- 20 =	--	x \$ -- =	\$ --
INDEPENDENT CLAIMS (37 CFR 1.16(b))	1	- 3 =	--	x \$ -- =	--
MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))				+ \$ -- =	
BASIC FEE (37 CFR 1.16(e))					+ \$345.00
Total of above Calculations =					
Reduction by 50% for filing by small entity (Note 37 CFR 1.8, 1.27, 1.28).					
TOTAL =					\$345.00

2. ☒ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 ☐ is enclosed.
☒ was filed in prior application number 09 / 476,643 and such status is still proper and desired (37 CFR 1.28(a)).
3. ☐ The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. _____. A duplicate copy of this sheet is enclosed.
4. ☒ A check in the amount of \$ 345 is enclosed.
5. ☒ Cancel in this application original claims 1-49 & 66-99 of the prior application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
6. ☒ The inventor(s) of the invention being claimed in this application is (are):
Dr. Edward L. Tobinick
7. ☐ This application is being filed by less than all the inventors named in the prior application. In accordance with 37 CFR 1.60(b), the Commissioner is requested to delete the name(s) of the following person or persons who are not inventors of the invention being claimed in this application:
8. ☒ Amend the specification by inserting before the first line the sentence: "This application is a ☐ continuation ☒ division of application number 09 / 476,643, filed Dec. 31, 1999, (status, abandoned, pending, etc.)."

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Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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9. ☐ New formal drawings are enclosed.
10. ☐ Priority of foreign application number _____, filed on _____ in _____
is claimed under 35 U.S.C. 119(a) - (d).
☐ The certified copy has been filed in prior application number ____ / _____, filed _____.
11. ☒ A preliminary amendment is enclosed.
12. ☐ The prior application is assigned of record to _____
13. ☐ Also enclosed: _____

14. ☒ The power of attorney in the prior application is to: EZRA SUTTON, P.A.
Plaza 9, 900 Route 9
Woodbridge, New Jersey 07095.
- a. ☒ The power of attorney appears in the original papers in the prior application.
- b. ☐ Since the power does not appear in the original papers, a copy of the power in the prior application is enclosed.
- c. ☐ Address all future correspondence to: (May only be completed by applicant, or attorney or agent of record.)

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar
Code Label here☐ Firm or☒ Individual NameEZRA SUTTON, P.A.Address Plaza 9, 900 Route 9

Address _____

City

Woodbridge

State

New Jersey

ZIP

07095

Country _____

Telephone (732) 634-3520

Fax

(732) 634-3511

9-5-00

Date

Signature
EZRA SUTTON

Typed or printed name

- ☐ Inventor(s)
- ☐ Assignee of complete interest. Certification under 37 CFR 3.73(b) is enclosed.
- ☒ Attorney or agent of record
- ☐ Filed under 37 CFR 1.34(a)
- Registration number if acting under 37 CFR 1.34(a) 25,770